0 500	05 (2)	this form, together w			Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (703) 746-4000			
ĬŇ	ISTINUCTIONS: This f	orm should be used for tra	nsmitting the ISS	Or <u>Fax</u> UE FEE and PUBI	JCATION FEE (if red	uired). Blocks	1 through 5	should be complet
ap ine	problem All lurther of deated unless corrected historypes for potitions	orm should be used for tra streependence including the below or directed otherwis ons. ICE ADDRESS (Note: Use Block I for	Patent, advance of in Block I, by (orders and notificati (a) specifying a new	on of maintenance fees correspondence addres	will be maile ss; and/or (b) i	d to the current	orate "PRE ADDR
JEM		NOR ADDRESS (Note: Use Block 60 7590 06/02/2005	r my change of address		Note: A certificate of Fee(s) Transmittal. I papers. Each additionave its own certific	of mailing can This certificate nal paper, such ate of mailing o	only be used f cannot be used as an assignm or transmission.	for domestic mail) for any other acco ent or formal draw
	LAW DEPARTM	MER LANE MD:TX3			I hereby certify that States Postal Service addressed to the M transmitted to the US	ertificate of M this Fec(s) Tra with sufficient ail Stop ISSU SPTO (703) 740	lalling or Transmittal is being to postage for fir FEE address 5-4000, on the	smission ng deposited with t rst class mail in an s above, or being date indicated belo
TBES	HAH2 00000041 50	3079 10663621				ie Herre		(Depos
	1400.00 DA				Ster	-e ~7	سيبوه	
	300.00 DA				Augu	st 30, 2	005	
	APPLICATION NO.	FILING DATE		PIRST NAMED INVI	ENTOR	ATTORNEY	DOCKET NO.	CONFIRMATIO
	10/663,621	09/16/2003		Robert F. Swin	nle	SC1	. 3515	
	APPLN. TYPE	SMALL ENTITY	ISSUE F	·	PUBLICATION FEE		EU(S) DUE	DATE DUE
	nonprovisional	МО	\$140	0	\$300	. \$1	700	09/02/200:
	EXAL	INER	ART UNIT		CLASS-SUNCLAS'S]		
	ZARNEKE	, DAVID A	2891	•	438-211000			
1.0	1.363).	e address or indication of "F lence address (or Change of 22) attached.	(1) the names of or agents OR, alt (2) the name of (n the patent front page, if up to 3 registered pate emaitively, a single firm (having as ey or agent) and the non attempts or agents. I	a member a		G. Doleza el Balconi	
Ā	"Pec Address" indicat	tion (or "Fee Address" Indicated more recent) attached. Use	of a Customer	2 registered pater listed, no name v	nt attorneys or agents. I vill be printed.	f no namo is		
A P N 3. A	"Pec Address" indicat TO/SB/47; Rev 03-02 of number is required. SSIGNEE NAME AND	RESIDENCE DATA TO B	e of a Customer B PRINTED ON T	listed, no name w	or type)			
A P N 3. A	"Pec Address" indicat TO/SB/47; Rev 03-02 of number is required. SSIGNEE NAME AND	or more recent) affached. Use	e of a Customer B PRINTED ON T	listed, no name w	or type)		d below, the d	ocument has been
A P N 3. AS	"Pec Address" indicat TO/SB/47; Rev 03-02 of number is required. SSIGNEE NAME AND	RESIDENCE DATA TO B an assignee is identified be 37 CFR 3.11. Completion of	E PRINTED ON T Iow, no extigned of this form is NO	listed, no name w THE PATENT (print data will appear on I a substitute for fili	or type)	nec is identifie	d below, the d	ocument has been
A P N 3. AS	Pec Address" indicat TO/SB/47; Rev 03-02 of tember is required. SSIGNEE NAME AND LEASE NOTE: Unless excordation as set forth in A) NAME OF ASSIGNI	RESIDENCE DATA TO B an assignee is identified be 37 CFR 3.11. Completion of	e of a Customer B PRINTED ON I low, no assigned of this form is NOT	listed, no name w THE PATENT (print data will appear on I a substitute for fili	or type) the patent. If an assigng an assignment. IY and STATE OR CO	nec is identifie	d below, the d	ocument has been
A E P N 3. A ³ Pi re	Pec Address" indical TO/SB/47; Rev 03-02 of tamber is required. SSIGNEE NAME AND LEASE NOTE: Unless A) NAME OF ASSIGNE Freescale	RESIDENCE DATA TO B an assignee is identified be 37 CFR 3.11. Completion of BE Semi conductor,	B PRINTED ON I low, no exsignce of this form is NO (B	HE PATENT (print data will appear on f a substitute for filin) RESIDENCE: (Cr. Austin,	or type) the patent. If an assignment. IY and STATE OR CO	nce is identifie		
A CP N 3. AS PICES	Pec Address" indical TO/SB/47; Rev 03-02 of tamber is required. SSIGNEE NAME AND LEASE NOTE: Unless A) NAME OF ASSIGNE Freescale	RESIDENCE DATA TO B an assignce is identified be 37 CFR 3.11. Completion of BE Semi conductor, assignce category or category	B PRINTED ON T low, no extigned of this form is NOT (B Inc.	HE PATENT (print data will appear on f a substitute for filin) RESIDENCE: (Cr. Austin,	or type) the patent. If an assignment. If and STATE OR COTX If and STATE OR COTX It and STATE OR COTX	nce is identifie		
A A SPICES A A TO	Pec Address" indicat TO/SB/47; Rev 03-02 of tamber is required. SSIGNEE NAME AND LEASE NOTE: Unless condution as act forth in A) NAME OF ASSIGNI Freescale to check the appropriate the following fee(s) are of	RESIDENCE DATA TO B RESIDENCE DATA TO B 37 CFR 3.11. Completion of 38 Semi conductor, assignce category or categor inclosed:	B PRINTED ON I low, no exsignce of this form is NO (B Inc. ics (will not be pri 4b.	Insted, no name we the PATENT (print data will appear on a substitute for film) RESIDENCE: (Cr. Austin, and the patent): Inted on the patent): Payment of Foc(s):	or type) the patent. If an assignment. If and STATE OR COTX If and STATE OR COTX It and STATE OR COTX	nec is identifie UNTRY) Corporation or o		
A AS Pleas Pleas TO	Pec Address" indicat TO/SB/47; Rev 03-02 of tamber is required. SSIGNEE NAME AND LEASE NOTE: Unless condution as act forth in A) NAME OF ASSIGNI Freescale to check the appropriate the following fee(s) are of lessue Fee Publication Fee (No sn	RESIDENCE DATA TO B RESIDENCE DATA TO B 37 CFR 3.11. Completion of 38 Semi conductor, assignce category or categor inclosed:	B PRINTED ON THE PRIN	Instead, no name we the PATENT (print data will appear on a substitute for fills) RESIDENCE: (Cr. Austin, and the patent): Payment of Foc(s): A check in the a Payment by cree	or type) the patent. If an assignment. IY and STATE OR CO TX Individual 10 Commonst of the fee(s) is entited and Form PTO-203.	nec is identified UNTRY) Corporation or conclosed. 8 is attached.	other private gro	oup entity 🚨 Gov
A AS PI re (A	Pec Address" indicat TO/SB/47; Rev 03-02 of tamber is required. SSIGNEE NAME AND LEASE NOTE: Unless condution as act forth in A) NAME OF ASSIGNI Freescale to check the appropriate the following fee(s) are of	RESIDENCE DATA TO B RESIDENCE DATA TO B 37 CFR 3.11. Completion of 38 Semi conductor, assignce category or categor inclosed:	B PRINTED ON THE PRIN	Instead, no name we the PATENT (print data will appear on a substitute for fills) RESIDENCE: (Cr. Austin, and the patent): Payment of Foc(s): A check in the a Payment by cree	or type) the patent. If an assignment. IY and STATE OR CO TX Individual (2) Commonst of the fee(s) is commonst of the fee(s) is commonst.	nec is identified UNTRY) Corporation or conclosed. 8 is attached.	other private gro	oup entity 🚨 Gov
3. AS PICES 4a. TO	"Pec Address" indicat TO/SB/47; Rev 03-02 of tamber is required. SSIGNEE NAME AND LEASE NOTE: Unless condation as set forth in A) NAME OF ASSIGNIE Frees calle the check the appropriate the following fee(s) are of lasue Fee Publication Fee (No sm Advance Order - # of lange in Entity Status (a. Applicant claims SM	RESIDENCE DATA TO B an assignee is identified be BE Semi conductor, assignee category or categor inclosed: and entity discount permitte Copies from status indicated above IALL ENTITY status. See 3	B PRINTED ON I low, no exsignce of this form is NO (B Inc. ics (will not be pri 4b. 7 CFR 1.27.	Instead, no name we the PATENT (print data will appear on a substitute for file) RESIDENCE: (Crant Austin, and the patent): Payment of Fec(s): A check in the a Payment by Creek of the Director is Deposit Account No.	or type) the patent. If an assigng an assignment. IY and STATE OR CO TX Individual OC mount of the fee(s) is entire and. Form PTO-203 hereby authorized by announced the series of th	Corporation or of the corporation or of the corporation or of the corporation or of the corporation of the corporation or of the co	other private greater fee (s), or close an extra column turn to latus. See 37 Ci	credit any overpay
3. AS PI de SE	"Pec Address" indicat TO/SB/47; Rev 03-02 of tamber is required. SSIGNEE NAME AND LEASE NOTE: Unless condation as set forth in A) NAME OF ASSIGNIE Frees calle the check the appropriate the following fee(s) are of lasue Fee Publication Fee (No sm Advance Order - # of lange in Entity Status (a. Applicant claims SM	RESIDENCE DATA TO B an assignee is identified be 37 CFR 3.11. Completion of BB Semi conductor, assignce category or categor inclosed: nall entity discount permitte. Copies from status indicated above.	B PRINTED ON I low, no exsignce of this form is NO (B Inc. ics (will not be pri 4b. 7 CFR 1.27.	Instead, no name we the PATENT (print data will appear on a substitute for file) RESIDENCE: (Crant Austin, and the patent): Payment of Fec(s): A check in the a Payment by Creek of the Director is Deposit Account No.	or type) the patent. If an assigng an assignment. IY and STATE OR CO TX Individual OC mount of the fee(s) is entire and. Form PTO-203 hereby authorized by announced the series of th	Corporation or of the corporation or of the corporation or of the corporation or of the corporation of the corporation or of the co	other private greater fee (s), or close an extra column turn to latus. See 37 Ci	credit any overpay
A AS PICE AND THE DOTTER OF THE PICE AND THE DOTTER OF THE PICE AND TH	"Pec Address" indicat TO/SB/47; Rev 03-02 of tamber is required. SSIGNEE NAME AND LEASE NOTE: Unless condation as set forth in A) NAME OF ASSIGNIE Frees calle the check the appropriate the following fee(s) are of lasue Fee Publication Fee (No sm Advance Order - # of lange in Entity Status (a. Applicant claims SM	RESIDENCE DATA TO B an assignee is identified be BE Semi conductor, assignee category or categor inclosed: and entity discount permitte Copies from status indicated above IALL ENTITY status. See 3	B PRINTED ON I low, no exsignce of this form is NO (B Inc. ics (will not be pri 4b. 7 CFR 1.27.	Instead, no name we the PATENT (print data will appear on a substitute for file) RESIDENCE: (Crant Austin, and the patent): Payment of Fec(s): A check in the a Payment by Creek of the Director is Deposit Account No.	or type) the patent. If an assigng an assignment. IY and STATE OR CO TX Individual OC mount of the fee(s) is entire and. Form PTO-203 hereby authorized by announced the series of th	Corporation or of the corporation or of the corporation or of the corporation or of the corporation of the corporation or of the co	other private greater fee (s), or close an extra column turn to latus. See 37 Ci	credit any overpay opp of this form).

In collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTOL-85 (Rev. 12/04) Approved for use through 04/30/2007.

OMB 0651-0033 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE



FACSIMILE

LAW DEPARTMENT FREESCALE SEMICONDUCTOR, INC.

DATE:

August 30, 2005

TO:

MS: ISSUE FEE

(703) 305-8283

(ADDRESSEE)

(EXTENSION)

USPTO

(703) 746-4000

(LOCATION)

(FAX NUMBER)

FROM:

Stacie Herrera for David G. Dolezal

(512) 996-6848

(SENDER)

(EXTENSION)

TOTAL NUMBER OF PAGES 3 (including this page)

IF YOU HAVE ANY TROUBLE OR QUESTIONS WITH TRANSMISSION, OR HAVE RECEIVED IT IN ERROR, PLEASE CALL@512) 996-6839

Docket No.: SC12711TP

Applicant: Robert F. Steimle et al

Serial No.: 10/663,621

Art Unit:

2891

Filed:

September 16, 2003

ALL ITEMS MARKED WITH AN "X" ARE INCLUDED:

x 1 page Facsimile Cover Sheet

x 1 page PTOL-85B Issue Fee Transmittal (in duplicate)

Paid by Deposit Account 503079, Freescale Semiconductor, Inc: \$1700

If Applicant has overlooked any additional fees, or if any overpayment has been made, the Commissioner is hereby authorized to credit or debit Deposit Account 503079, Freescale Semiconductor, Inc.

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS

BEING FACSIMILE TRANSMITTED TO THE PATENT AND TRADEMARK OFFICE:

ON: 8/30/05

Date

Signature

FREESCALE LAW DEPARTMENT 7700 W. PARMER LANE MD: TX32/PL02 AUSTIN, TEXAS 78729 Fax Number (512) 996-6854

NOTICE: This facsimile transmission may contain information that is confidential, privileged or exempt from disclosure under applicable law. It is intended only for the person to whom it is addressed. Unauthorized use, disclosure, copying or distribution may expose you to legal liability. If you have received this transmission in error, please immediately notify us by telephone (collect) to arrange for return of the documents received and any copies made. Thank you.